L14000 109979

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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ATTORNEYS AT LAW

CORD C. MELLOR

Board Certified Wills, Trusts & Estates

DOUGLAS W. GRISSINGER Trial Practice

Also Admitted District of Columbia

JEFFREY M. BACKO

Friday, June 26, 2015

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Articles of Amendment - St. Lucie Automotive Properties LLC

Dear Sir/Madam:

Please find enclosed the Cover Letter and Articles of Amendment for St. Lucie Automotive Properties LLC.

Also enclosed is a check in the amount of \$30.00 for the filing fee and certificate of status.

If you have any questions or require additional information, please let me know.

Sincerely,

MELLOR & GRISSINGER

Suzy Grissinger

Legal Assistant to

Douglas W. Grissinger

/shg Encl. #140229

COVER LETTER

TO:	Registration Sec Division of Corp				
ON IN IN		E AUTOMIVE PROPEI	RTIES LLC		
SUBJ	ECT:	Name of Limi	ted Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspon	ndence concerning this matter	to the following:		
	•	Douglas W. Grissing	er		
			Name of Person		
		Mellor & Grissinger			
Firm/Company					
		13801-D Tamiami Tı	rail		
			Address		
		North Port, Florida 3	4287		
	City/State and Zip Code				
		doug@northportlaw.com			
		E-mail address: (to be used for future annual report not	ification)	
For fu	rther information c	oncerning this matter, please ca	all:		
Douglas W. Grissinger		941 426-1193	-		
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclos	sed is a check for the	ne following amount:			
□ \$2	25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

St. Lucie Automotive Properties LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 7/11/2014 and assigned Florida document number L14000109979 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2091 Tamiami Trail Enter new principal offices address, if applicable: Port Charlotte, FL 33048 (Principal office address MUST BE A STREET ADDRESS) 2091 Tamiami Trail Enter new mailing address, if applicable: Port Charlotte, FL 33048 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	Butt, Zia	4950 Pocatella Avenue			
		North Port, FL 34287	■ Remove		
MGR	Memon, Muhammed Y	2400 Harbor Blvd., suite 10	Add		
		Port Charlotte, FL 33952	□ Remove		
MGR	Memon, Tanweer A	3657 Trolgire Blvd.	= Add		
,		North Port, FL 34286	□ Remove		
		 ,	Remove		
			□ Add		
			□ Remove		
			Add		
			□ Remove		

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
E.	Effective date, if other than the date of filing:				
	Dated March 30 2015				
	and a				
	Signature of a member or authorized representative of a member				
	Douglas W. Grissinger (Attorney - Registered Agent)				
	Typed or printed name of signee				

Page 3 of 3

Filing Fee: \$25.00

